Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998

CLAIMS AS FILED - PART I									SMALL ENTITY			OTHER THAN	
		1	(Column 1)			(Column 2)		١ ـ	TYPE		OR	SMALL	ENTITY
FOR			NUMBER FILED			NUMBER EXTRA			RATE	FEE		RATE	FEE
BASIC FEE					1				ί,	380.00	OR	. [-	760.00
TOTAL CLAIMS			minus 20=		20=	* .	t		X\$ 9=		OR	X\$18=	378
INE	EPENDENT CI	LAIMS	minus 3 =		3 =	*			X39=		OR	X78=	
MULTIPLE DEPENDENT CLAIM PRESENT									+130=		OR	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2								ı	TOTAL	ļ	OR	TOTAL	1138
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)									SMALL	ENTITY	OR	OTHER SMALL	THAN
AMENDMENT A		REM A	AIMS IAINING FTER NDMENT		PR	HIGHEST NUMBER EVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	39	Minus	**	4/	=		X\$ 9=		OR	X\$18=	
AME	Independent	*	7	Minus	***	3	=		X39=		OR	X78=	
	FIRST PRESE	NIAH	DN OF M	ULTIPLE DEI	PEND	ENT CLAIM		'	+130=		OR	+260=	
								L	TOTAL		OR	TOTAL	
							(0.1	P	ADDIT. FEE			ADDIT. FEE	
			umn 1) AIMS			olumn 2) HIGHEST	(Column 3)	i -		4001			4001
AMENDMENT B		REM Al	IAINING FTER NDMENT		PR	NUMBER EVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*		Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*		Minus	***		=		X39=		OR	X78=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									+130=		OR	+260=	
									TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)													<u>=</u>
ENTC		CL REM AF	AIMS AINING TER IDMENT		F PR	IIGHEST IUMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*		Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*		Minus	***		=		X39=			X78=	
<u> </u>	FIRST PRESE	NTATIC	N OF MU	JLTIPLE DEF	PEND	ENT CLAIM		 -			OR	A/0=	
	# If the entry is column 1 is less than the entry is solven 0, with #0" is solven 0										OR	+260=	
* If the entry in column 1 is less than the entry in column 2, write "Q" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
•	Tha "Highast Ni	has Dea.	damete Dai	d Ear" (Total or	· ladaa	andont) is the	highest number	r falls	ed in the and	ropriate has	in col	umn 1	